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	CONTI	RIBUTIONS	SUMMAR			This Period	From Beginnin of Report Perio #1 through End of This Reporting Period
1.	. Total Monetary	Contributions Re	eceived in Exce	ess of \$100			0
2.	. Total Monetary	Contributions Re	eceived of \$100	O or Less			0
	`			This Period	Cumulative From Beginning of Report Period #	;; 1 :	
					This Reporting		
3.	Total Amount of Received		ntributions		1,4114	_	
4.	(Add Lines 1 an Total Value of Ir Excess of \$100	Kind Contribution	ons Received i		0		
	· :		~ E	XPENSES SÚI	MMARY		
5	Total Monetary	Expenses Paid i	n Excess of \$1	00		10410	1869
6.	Total Monetary E Total Amount o	xpenses Paid of	f\$100 or Less	(Bin)	IN Fais)	15 24	45
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	of \$100						
				AFFIRMATI	ON		
	Under Penalty	of Perjury That	t the Foregoir	ng is True and Co	rrect.		
Declare				_			

Name (print)

Office (if applicable)

District (if applicable)

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Amount of All Campaign Contributions to Line 1 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION	CHECK HERE
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Office (if applicable)

District (if applicable)

Expense Categories

CATEGORIES	CODE
Office expenses	A
Expenses related to volunteers	В
Expenses related to travel	С
Expenses related to advertising	D
Expenses related to paid staff	E
Expenses related to consultants	E-
Expenses related to polling	G
Expenses related to special events	Н
** Goods and services provided in kind for which money would otherwise have been paid	1
Other miscellaneous expenses	J
Expenses related to NRS 294A.160 (Disposition of Unspent Contributions)	К

^{**} NRS 294A.362 requires "In Kind" contributions and expenses to be reported on a separate form, which is attached.

7

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Name (print)

Office (if applicable)

District (if applicable)

Expenses in Excess of \$100 Transfer Total Amount of All Campaign Expenses to Line 5 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY (See Previous Page) NRS 294A.365	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE
INGER McDowell Reno, NU	F	11/4/04	\$ 525-00
Inger McDowell Reno, NU Anthony Guzmand 245 Tonalea Aug Henderson, NU 89015	F	11/4/04	\$ 516 °C
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Rev: JUL-03

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